



Heber City Corporation  
BUSINESS LICENSE DIVISION  
75 North Main, Heber City, UT 84032  
Phone (435) 654-4830 Fax (435) 657-2543

**OFFICE USE ONLY**

Issued \_\_\_\_\_ Permit No. \_\_\_\_\_  
Receipt No. \_\_\_\_\_ Code \_\_\_\_\_  
Permit Fee \_\_\_\_\_  
Other Fee \_\_\_\_\_  
**Total**

**EVENT PERMIT APPLICATION**

**SECTION I: Event Sponsor Information**

Event Title \_\_\_\_\_

Event Location \_\_\_\_\_

Sponsor \_\_\_\_\_ Sponsor Phone No. \_\_\_\_\_

Mailing Address \_\_\_\_\_  
Street/P.O. Box City State Zip

Contact Name \_\_\_\_\_ Daytime Phone No. \_\_\_\_\_

Address \_\_\_\_\_  
Street/P.O. Box City State Zip

Federal ID: ☐ SSN ☐ EIN \_\_\_\_\_ Utah Corporation, LP or LLC No. \_\_\_\_\_

Temporary Sales Tax No. \_\_\_\_\_ State Withholding No. \_\_\_\_\_

**SECTION II: Organization**

- ☐ Non-Profit Corporation  
☐ Sole Proprietorship  
☐ Partnership  
☐ Limited Partnership or LLC  
☐ Corporation  
☐ Other:

**SECTION III: Detail**

Event Date(s): \_\_\_\_\_ **Attach:**  
Event Time(s): \_\_\_\_\_  
Setup: \_\_\_\_\_

**Description:**

**SECTION IV: Misc.**

- Map of layout including description of temporary structure and sign.
- Letter of approval from property owner.
- Written evidence of use of restrooms within 300 feet.
- Provide \$2,000 Licensing & Permitting Bond.

**◆Application must be submitted at least one week prior to event**

**FOR OFFICE USE ONLY: Application Review/Comments Section**

- ☐ Business License Division ☐ Police Department ☐ Public Works ☐ Building Department  
☐ Fire Department ☐ Zoning Department ☐ Health Department

**SECTION IV: Verification of Accuracy-Acknowledgment of Responsibility**

Under penalty of perjury, I hereby certify that the information provided for this entire permit application is complete and accurate. I further certify that updated information will be provided in writing or on a new permit application, as required, to the City of Heber Business License Division no less than 5 working days prior to the event. I hereby acknowledge that illegal or fraudulent business practices are grounds for revocation of the event permit.

Signature of Authorized Business Agent/Owner \_\_\_\_\_ Date \_\_\_\_\_  
Approval of Business License Administrator \_\_\_\_\_ Date \_\_\_\_\_